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APPLICANTS

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** CONTINUING DATA ***
*✓03 e*** FOREIGN APPLICATIONS ***
*✓03 e***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 05/04/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged <i>[Signature]</i>	R. <i>[Initials]</i>		
Examiner's Signature	Initials		
STATE OR COUNTRY WA	SHEETS DRAWING 10	TOTAL CLAIMS 40	INDEPENDENT CLAIMS 4

ADDRESS
22801

TITLE

Scalable video transcoding

FILING FEE RECEIVED 1216	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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